Fill in this information to identify your case: Debtor 1 Rebecca L Horvath					
Deptor 1	First Name	Middle Name	Last Name		
Debtor 2	, not realis	a.o . tao	Zuot Hamo		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO		
Case number	23-51015				
(if known)					

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/1

page 1 of 2

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	417,080.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	58,114.22
	1c. Copy line 63, Total of all property on Schedule A/B	\$	475,194.22
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	478,374.36
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	139,742.47
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	163,016.36
	Your total liabilities	\$	781,133.19
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	13,016.02
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,815.90
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	ı personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Summary of Your Assets and Liabilities and Certain Statistical Information

Official Form 106Sum

the court with your other schedules.

Debtor 1	Rebecca	L Horvath

Case number (if known) 23-51015

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6			

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$
9e. Obligations arising out of a separation agreement or divorce that you did not report as	\$
priority claims. (Copy line 6g.)	Φ
Of Debte to nancian or profit sharing plans, and other similar debte. (Cany line 6h.)	. 🗘
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$
On Tatal Add lines On Abrassah Of	¢
9g. Total. Add lines 9a through 9f.	Φ

Fill in	this information to ident	tify your oc	200:					1				
Debto		ecca L H										
Debto (Spous	or 2						_					
Unite	d States Bankruptcy Co	urt for the:	NORTHERN DISTRIC	CT OF OHIO								
	number 23-5101							Check if t	hic ic:			
(If knov		J		-				■ An an		l filing		
								☐ A sup	plemer	nt showing	g postpetition llowing date:	chapter
Off	icial Form 106	<u> </u>						MM /	DD/ YY	/YY		
Sc	hedule I: You	ır Inco	ome						,			12/15
spous attach Part	se. If you are separated a separate sheet to the Describe Emp	d and you nis form. (are married and not filii r spouse is not filing wi On the top of any additi	ith you, do not	include in	for	natio	on about you	ır spoı	use. If mo	re space is	needed,
	Fill in your employmer information.	ιτ		Debtor 1				De	btor 2	or non-fil	ing spouse	
	If you have more than o	e page with Employment status		■ Employed				☐ Employed				
i	attach a separate page information about addition			☐ Not employed				☐ Not employed				
•	employers.		Occupation	Self Employ	yed							
	Include part-time, seaso self-employed work.	onal, or	Employer's name	4 Corners C	Cleaning, I	nc.						
	Occupation may include or homemaker, if it appli		Employer's address	3479 E Tus Barberton,								
			How long employed t	here? 26	years							
Part 2	Give Details A	bout Mon	thly Income									
spous If you	e unless you are separa	ited. e have mo	ate you file this form. If your than one employer, countries form.				•	oyers for that	persor	on the lin	nes below. If y	
								For Debtor	1		otor 2 or ng spouse	
			ry, and commissions (becalculate what the month)			2.	\$	(0.00	\$	N/A	
3.	Estimate and list mont	thly overti	me pay.			3.	+\$	(0.00	+\$	N/A	
4.	Calculate gross Incom	e. Add lin	e 2 + line 3.			4.	\$	0.0	0	\$	N/A	

Debt	or 1	Rebecca L Horvath	-	Case r	number (<i>if ki</i>	nown)	23-510)15		
					Debtor 1		non-f	ebtor 2	ouse	
	Cop	by line 4 here	4.	\$	(0.00	. \$		N/	<u>A</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	(0.00	\$		N/	A
	5b.	Mandatory contributions for retirement plans	5b.	\$	(0.00	\$		N/	A
	5c.	Voluntary contributions for retirement plans	5c.	\$	(00.0	\$		N/	A
	5d.	Required repayments of retirement fund loans	5d.	\$	(00.0	\$		N/	
	5e.	Insurance	5e.	\$		0.00			N/	
	5f.	Domestic support obligations	5f.	\$		0.00			N/	
	5g.	Union dues	5g.	\$		0.00			N/	
	5h.	Other deductions. Specify:	5h.+	- \$	(0.00	+ \$		N/	<u>A</u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	(0.00	\$		N/	<u>A</u> _
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	(0.00	\$		N/	<u>A</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	12,100	n 00	\$		N/	۸
	8b.	Interest and dividends	8b.	\$—		0.00			N/	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ \$		0.00			N/	
	8d.	Unemployment compensation	8d.	\$		0.00			N/	
	8e.	Social Security	8e.	\$	(0.00	\$		N/	A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	(0.00	\$		N/A	A
	8g.	Pension or retirement income	8g.	\$		0.00	\$		N/	
	8h.	Other monthly income. Specify: Contribution from partner	8h.+	- \$	916	3.02	+ \$		N/	<u>A</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	13,016	6.02	\$		N	/A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	13	3,016.02	+ \$		N/A =	= \$	13,016.02
11.	Incluothe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depen	·	•					
	Spe	cify:						11.	+\$_	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies						12.	\$	13,016.02
13.	Doy	you expect an increase or decrease within the year after you file this form	?							oined hly income

Yes. Explain:

Fill	in this information to identify your case:					
Deb	ntor 1 Rebecca L Horvath			Check	(if this is:	
				■ A	An amended filing	
	otor 2ouse, if filing)				A supplement show 3 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORT	HERN DISTRICT OF OHIO		<u></u>	MM / DD / YYYY	
Cas	e number 23-51015					
(If k	nown)					
0	fficial Form 106J					
S	chedule J: Your Expe	nses				12/15
info	as complete and accurate as possible ormation. If more space is needed, at mber (if known). Answer every question to be completed to be completed to the complete to the compl	tach another sheet to this f				
1.	Is this a joint case?					
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a sepa	arate household?				
	☐ No ☐ Yes. Debtor 2 must file Offi	cial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.	
0		,	•			
2.	Do you have dependents? ■ No					
	Do not list Debtor 1 and Yes Debtor 2.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes
						□ No □ Yes
						□ No
						☐ Yes
						□ No
						☐ Yes
3.	expenses of people other than	■ No □ Yes				
Par	t 2: Estimate Your Ongoing Mont	hly Fynenses				
Est	imate your expenses as of your bank benses as of a date after the bankrupt blicable date.	ruptcy filing date unless y				
	lude expenses paid for with non-casl value of such assistance and have in					
	ficial Form 106l.)	iciaded it on <i>Schedule I. T</i>	our meome		Your expe	enses
4.	The rental or home ownership experience payments and any rent for the ground		nclude first mortgag	e 4. \$		0.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or rente	er's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and			4c. \$		150.00
_	4d. Homeowner's association or co			4d. \$		0.00
5.	Additional mortgage payments for	your residence, such as hor	ne equity loans	5. \$		0.00

ebtor 1	Rebecca L Horvath	Case num	ber (if known)	23-51015
Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	600.00
6b.	Water, sewer, garbage collection	6b.		50.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		0.00
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies		\$	750.00
	dcare and children's education costs	8.		0.00
	hing, laundry, and dry cleaning	9.	\$	200.00
	sonal care products and services	10.		150.00
	ical and dental expenses	11.	\$	150.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	325.00
	not include car payments.		· <u> </u>	
	ertainment, clubs, recreation, newspapers, magazines, and books	13.		100.00
	ritable contributions and religious donations	14.	D	0.00
	rance.			
	not include insurance deducted from your pay or included in lines 4 or 20.	4.5	Φ.	
	Life insurance	15a.		0.00
	Health insurance	15b.	· ·	633.90
15c.	Vehicle insurance	15c.		130.00
	Other insurance. Specify:	15d.	\$	0.00
Taxe	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe	cify:	16.	\$	0.00
	allment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	577.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as		· -	
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe		19.		
•	er real property expenses not included in lines 4 or 5 of this form or on Sche		our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20d. 20e.		0.00
Othe	er: Specify:	21.	+\$	0.00
Calc	culate your monthly expenses			
	Add lines 4 through 21.		\$	3.815.90
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,010.00
			·	0.045.00
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,815.90
Calc	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	13,016.02
	Copy your monthly expenses from line 22c above.	23b.		3,815.90
۷۵۵.	Copy your monthly expenses nominate 226 above.	230.	-φ	3,815.90
230	Subtract your monthly expenses from your monthly income			
∠3C.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	9,200.12
	The result is your monthly het income.	200.		-,
For e modi	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage?			ease or decrease because of
■ N	lo			
ΠY	es. Explain here:			
ш.	C3. Explain Horo.			

Fill in this information to identify your case:							
Debtor 1		Rebecca L Horvath					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	Г ОГ ОНЮ				
_	23-51015						
(if known)							

■ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
D	id you pay or agree to pay someone who is NO	an attorney to help you fill out bankruptcy forms?
	No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	at they are true and correct.	the summary and schedules filed with this declaration and X Signature of Debtor 2
	Date March 6, 2024	Date